

FFY 2011 STATE AGENCY GOALS, STRATEGIES AND ACTION STEPS

FFY 2011 Goals for the State Agency have been developed through the joint State/local planning process. The process was developed and implemented by the State and local agencies and was designed to be a comprehensive planning and evaluation process that incorporates a State strategic plan, State and local agency annual plans, and program performance measures.

A Nebraska WIC Program mission statement was developed to define the program and its purpose. The Program mission statement is **“To make a positive difference in the nutrition and health of families and individuals by providing services in a professional and respectful manner.”**

Strategic Planning Process

The new process was modeled after portions of the state’s MCH planning process and incorporates more input from WIC partners outside the state agency. Five year goals are developed for nutrition and breastfeeding. One to three year goals are developed for client services and vendor management. The availability of evidence based interventions is included as part of the needs assessment. The original strategic areas were discontinued; goals were developed in nutrition and health areas identified as priorities. A summary of the revised process follows.

- Needs assessment phase—collection of information and issues for WIC categories from partner surveys, staff surveys and preliminary data collection; small state/local WIC agency and partners workgroups meet to further develop nutrition/health problem statements and review data for WIC categories and prioritize issues; a “client services” state/local WIC agency group was formed to address “service delivery” type issues
- Planning phase— the state/local WIC agency planning group meets in a two day session to 1) to review all problem statements and data and prioritize problems that will be addressed in goals, using a criteria scoring matrix; and 2) develop goal statements and strategies for each of the priority problems selected. Individual local agencies and the state agency develop agency action plans
- Implementation/evaluation phase—annual progress reviews completed and updates made to action plans based on progress reviews; a final evaluation completed at the end of the five year goals; the WIC performance measures continue to be used as an overall measure of program performance

Format used for the goals, strategies and action steps.

- Goal statements are defined as clear, concrete and precise with a measurable outcome. They indicate what will result when the goal is accomplished.
- Strategies are defined as a statement that describes how the goal will be accomplished; strategies are action oriented.
- Action steps break the strategy into individual tasks which have distinct and independent purposes, each of which produces a deliverable.

Goals included in the FFY 11 Plan:

- **Nutrition and Health, Breastfeeding, Client Services, Vendor Management**
 - A summary of action steps completed may be found in the “Special Notes/Evaluation Ideas” column under “Progress” .

FFY2011 Goals, Strategies and Action Steps—Ongoing

Nutrition/Health, Breastfeeding, Client Services

State Agency Goal: Vendor Management

ACTION PLAN – NEBRASKA STATE WIC PROGRAM – PROGRESS REPORT FY2011 PLAN

JOINT BREASTFEEDING GOAL: By August 1st, 2013, increase the percent of exclusively breastfed infants at 6 months of age.

	%	Date	Data Source
Baseline:	5.3%	2007	PedNSS Table 7F
Progress:	5.4 %	2008	PedNSS Table 7F
Progress:	8.1 %	2009	PedNSS Table 7F
State Final:			

NEEDS ASSESSMENT:

- The 2007 Pediatric Nutrition Surveillance Statistics show 68.2% of infants were ever breastfed, and 25% of infants were breastfed at least six months. The rate of any breastfeeding versus the rate of exclusive breastfeeding, only 5% of infants are exclusively breastfed 6 months of age and 13% exclusively breastfed at 3 months of age.
- The Healthy People 2010 Breastfeeding Goals for the United States include "Increase exclusive breastfeeding at age 6 months to 25%".
- WIC promotes breastfeeding as the norm for infant feeding. Policy recommendations from the American Academy of Pediatrics, the World Health Organization and the CDC state: "Exclusive breastfeeding is ideal nutrition and sufficient to support optimal growth and development for approximately the first six months after birth".
- Studies show that exclusive breastfeeding provides the most impact on long and short-term health outcomes.
- Staff support of exclusive breastfeeding, ability of staff to use effective counseling skills to help participants identify and overcome individual barriers to breastfeeding, and ability of staff to identify and manage common breastfeeding problems are essential elements to improve rates of exclusive breastfeeding and also breastfeeding duration.

JOINT STRATEGY: Provide encouragement, education and support for mothers to exclusively breastfeed for the first six months.

ACTION STEPS: (what & why)	WHO:	WHEN:	SPECIAL NOTES:
1. Participate in Nebraska Breastfeeding Coalition to collaborate with partners in activities that promote and support breastfeeding to ensure breastfeeding messages are consistent and to increase overall support for breastfeeding outside of the WIC environment.	Julieann	Ongoing	<u>Progress 2010:</u> Nebraska Breastfeeding Coalition launched its website, nebreastfeeding.org , in May 2010. State Breastfeeding Coordinator participates on the Public Health Workgroup and attends breastfeeding coalition meetings. WIC Local Agency staff members

ACTION STEPS: (what & why)	WHO:	WHEN:	SPECIAL NOTES:
			<i>participate in various coalition workgroups and attend coalition meetings. In January 2010, State Breastfeeding Coordinator and two NE Breastfeeding Coalition representatives participated in the USBC Conference on Coalitions.</i>
2. Collaborate with the Nutrition and Activity for Health Program to implement CDC Obesity Grant activities related to breastfeeding promotion and support.	Julieann	Ongoing	
3. Support advanced training for local agency breastfeeding coordinators to build stronger breastfeeding support system among WIC local agencies.	Julieann	Ongoing	<ul style="list-style-type: none"> • NWA Nutrition and Breastfeeding Conference – September 21-23, 2010 • CLC Course – October in Fremont, NE • CBE Courses
4. Define “exclusive” breastfeeding and how it relates to WIC to ensure consistent and accurate use of terminology for breastfeeding education and data reporting.	Julieann Workgroup	Sep 2009	<p><i>Progress 2010:</i> <i>As part of the August 2009 WIC food package training, emphasis was given to appropriate definition and use of “exclusive” breastfeeding as defined by CDC, and how the term “fully” breastfeeding as defined by WIC can be used in assessment of breastfeeding status and provision of nutrition education.</i></p> <p><i>**Action Step Completed.</i></p>
5. Host CDC/USBC bimonthly telephone teleconferences to keep updated on national breastfeeding priority issues and activities.	Julieann	Ongoing	<ul style="list-style-type: none"> • Promote participation on calls to breastfeeding coalition and distribute information.
6. Provide administrative support to 12 WIC local agencies for the breastfeeding peer counseling program.	Julieann	Ongoing	<p><i>Progress 2010:</i> <i>With additional Federal Funding received in FY2010 – the BFPC program was expanded to 8 additional local agencies bringing the total to 12 agencies that</i></p>

ACTION STEPS: (what & why)	WHO:	WHEN:	SPECIAL NOTES:
			<p><i>will provide peer counselor services. A complete report on the BFPC program activities in FY2010 is included as part of the State Plan.</i></p>
7. Identify and implement a staff assessment tool of breastfeeding knowledge, skills and beliefs in order to determine priorities for staff training.	Julieann	December 2009	<p><u>Progress 2010:</u> <i>Staff breastfeeding competencies were established as part of the USDA "Using Loving Support to Grow and Glow in WIC (Breastfeeding Competency Training)." This standardized competency-based curriculum was designed to ensure that all staff attains a level of proficiency in the skills required to promote and support breastfeeding in the WIC setting. This curriculum will be the priority for staff training in breastfeeding.</i></p> <p><u>**Action Step Completed.</u></p>
8. Provide and/or recommend breastfeeding training resources for local agency staff based on staff assessment tool to ensure staff members provide accurate, consistent messages that encourage exclusive breastfeeding.	Julieann	January 2010 & Ongoing	<p><u>Progress 2010:</u> <i>In April 2010, 200 WIC local agency staff attending the WIC/CSFP meeting participated in the session "How WIC Supports Breastfeeding" to begin training in the breastfeeding competency based curriculum and in the remainder of FY2010 and in FY2011, all NE WIC staff will be trained using "Loving Support to Grow and Glow in WIC" training curriculum.</i></p>
9. Coordinate breastfeeding support and promotion with the new WIC food package and changes related breastfeeding mothers and infants.	Julieann	October 2009 & Ongoing	<p><u>Progress 2010:</u> <i>In August 2009, all WIC Local agency staff attended full day training for new food package implementation. This training included a session on breastfeeding</i></p>

ACTION STEPS: (what & why)	WHO:	WHEN:	SPECIAL NOTES:
			<i>mother-baby pairs which presented detailed information on breastfeeding status, support for fully breastfeeding in the first month of life, training tools for assessment of breastfeeding status, and other breastfeeding related food package concerns.</i>

ACTION PLAN – NEBRASKA STATE WIC PROGRAM – PROGRESS REPORT FOR FY2011 PLAN

JOINT NUTRITION & HEALTH GOAL: By August 1, 2013, reduce the percentage of Nebraska WIC children ages 2-4 that are at or above the 85th percentile BMI-for-age.

	%	Date	Data Source
Baseline:	29.6	2007	PedNSS Table 6F
Progress:	30.9	2008	PedNSS Table 6F
Progress:	31.4	2009	PedNSS Table 6F
State Final:			

NEEDS ASSESSMENT:

- Childhood overweight is a priority issue for public health.
- According to PedNSS data, the prevalence of childhood overweight among WIC children in Nebraska has steadily increased from 20% in 1994 to approximately 30% in 2007.
- Nebraska WIC system reports for 2007 show that 23% of all WIC children ages 2-4 were assigned a risk code for routinely feeding sugar containing fluids.
- Television viewing and having a television in the bedroom both have been associated with overweight in children 1-5 years of age.
- In 2007 – the Expert Committee Recommendations for Prevention of Childhood Obesity was published in Pediatrics. This expert committee paper presented the most complete review of evidenced based interventions and made recommendations related to specific healthy eating and activity habits, parenting actions and patient-centered communication protocols.
- Many of the Expert Committee recommendations can be implemented in the WIC setting.

JOINT STRATEGY #1: Use a family feeding dynamics approach to provide nutrition education.

ACTION STEPS: (what & why)	WHO:	WHEN:	SPECIAL NOTES:
1. Provide workshop training opportunities for local agency CPA staff to improve staff knowledge of and ability to incorporate feeding dynamics as an integral part of nutrition and health education.	Julieann Contract trainer	April 2009 April 2010	Progress 2010: Action Step Completed in April 2009.
2. Attend the Ellyn Satter 4-day workshop; <i>Feeding With Love and Good Sense</i> to gain an in-depth understanding of the feeding relationship and improve ability to incorporate aspects of feeding dynamics into nutrition education from the state level.	Julieann	October 2009	Progress 2010: Action step not completed and this workshop is no longer offered. Alternate web courses in Eating Competence ecSatter model will be investigated.
3. Implement feeding dynamics friendly nutrition education materials for clients to ensure provision of consistent messages.	Julieann Workgroup	July 2009 Ongoing	Progress 2010: Feeding Dynamics articles related to Infant and Child Feeding, Family Meals, Child Growth

			<i>& Development, Eating Competence and others are available for download from the Ellyn Satter Associates website and can be used by local agency staff with clients as part of nutrition education.</i>
4. Develop and implement a system to provide continual training opportunities related to feeding dynamics for local agency staff.	Julieann	September 2010	<i>Progress 2010:</i> <i>State and Local Agency Staff continue to receive updated articles and newsletters, such as the Family Meals Focus from Ellyn Satter Associates. Feeding dynamics education principles are incorporated into training and resource materials for WIC CPA Staff.</i>
5. Implement nutrition education activities targeted at limiting consumption of sugar sweetened beverages, encouraging family meals and limiting eating out and fast food restaurants.	Julieann	March 2011 Ongoing	<i>Progress 2010:</i> <i>Implementation of specific nutrition education materials targeting these areas was postponed due significant staff time dedicated to WIC Food Package Implementation and follow-up activities.</i>
6. Participate in Community Nutrition Partnership Council activities to continue to implement action steps from SNAC plan.	Julieann	Ongoing	<i>Progress 2010:</i> <i>State WIC Nutrition Coordinator participates in biannual CNPC meetings and WIC program collaborates on use of nutrition messages and educational materials</i>

JOINT STRATEGY #2: Encourage family lifestyle behaviors that increase physical activity.

ACTION STEPS: (what & why)	WHO:	WHEN:	SPECIAL NOTES:
1. Implement nutrition education activities focused on limiting TV time to less than 2 hours per day and keeping television out of children's bedrooms.	Julieann	June 2011	<i>Progress 2010:</i> Implementation of specific nutrition education materials and activities targeting these areas was postponed due to significant staff time dedicated to WIC Food Package Implementation and follow-up activities.
2. Collaborate with the DHHS Nutrition and Activity for Health Program on physical activity promotion for preschool age children and share information and resources with WIC local agencies.	Julieann	Ongoing	
3. NEW ACTION STEP. Collaborate with Community Nutrition Partnership Council to investigate the implementation of the "5-4-3-2-1-GO!" message throughout the lifecycle through combined campaign and materials.	Julieann	May 2011	The 5-4-3-2-1-GO! Message promotes nutrition and physical activity messages and this campaign has been successfully implemented by community partners in three Nebraska cities.

ACTION PLAN – NEBRASKA WIC PROGRAM – PROGRESS REPORT FOR FY 2011 PLAN

STATE AGENCY VENDOR MANAGEMENT GOAL: By August 1, ~~2010~~ 2011, the percentage of problem WIC checks will decrease.

EVALUATION	%	Date	Data Source
State Goal			
Baseline:	1.02%	FY 2008	Banking Reports
Progress:	.71%	October 2008 – May 2009	Banking Reports
Progress:	.68%	October 2009 – May 2010	Banking Reports
State Final:			

NEEDS ASSESSMENT:

- The new food packages will add new foods to the WIC approved foods provided to the WIC shopper. This will change the requirements for WIC authorized stores for inventory of specific categories such as fresh fruits and vegetables, whole grains, and baby food. There will also be changes for the WIC cashier as the value added voucher will be a new component of the WIC check cashing processing.
- Fiscal Year 2009 will be reauthorization of all of Nebraska WIC retailers. This will be an excellent opportunity for store visits by WIC staff to document selection criteria requirements. Final determination of approval will be made by State WIC staff after review of all the documentation as per our authorization process.
- Stores that are approved will then have staff attend contract training sessions held across the state at various locations. At these training sessions the new food packages will be explained as well as all of the other contractual components of the training.
- Training of WIC staff will be critical for the successful implementation of the new food packages. We will conduct a Train the Trainer program for local agency WIC vendor managers on the store authorization visit and contract training in preparation for the implementation of the new food packages. This training has been effective in the past for ensuring that all staff are informed and carry out the WIC authorization process and contract training in a consistent and effective manner across the state. The conducting of the store visits and training will be even more crucial with the implementation of the new food packages.
- Providing training will help ensure that cashiers and employees involved in WIC transactions are better informed on the WIC check cashing procedures, thus eliminating problems at the check out counter.
- Tracking rejected checks may provide another avenue for noting errors with WIC check transactions, inventory and pricing. Follow-up with the WIC client and/or WIC retailer through educational efforts may help to clarify procedures so as to avoid future problems.
- In addition to educational efforts, a strengthened monitoring program may also contribute to improvement of the WIC transaction and reduce problem checks.

STRATEGY: Coordinate training for vendor management staff and WIC vendors for successful implementation of the new food packages by meeting inventory, training, and policy requirements.

ACTION STEPS: (what & why)	WHO:	WHEN:	SPECIAL NOTES:
1. Collaborate with the Nebraska WIC Vendor Advisory Committee to foster a cooperative partnership in carrying out the implementation of the new food packages in the Nebraska WIC Program's authorized stores.	State WIC staff	Ongoing	<i>Progress 2010:</i> The committee has been an important partner in the food package implementation. The group continues to provide feedback and input on the new food package and other areas of vendor management through our ongoing meetings and communications.
2. Revise the vendor selection criteria, inventory requirements, and authorization process to reflect the new food packages.	State and local vendor management staff	October 2008	Utilize the results of the Nutrition Environment Measures Study and WIC retailer surveys to assess the needs of stores and current inventory levels of the new foods/categories. <i>Progress 2010:</i> Completed.
3. Revise vendor application materials to reflect the new food packages.	State and local vendor management staff	November – December 2008	<i>Progress 2010:</i> Completed.
4. Provide training to local agency WIC vendor managers on upcoming changes with the new food packages so that staff are informed and will effectively carry out the vendor reauthorization/vendor training process successfully.	Local and state WIC staff	March 2009	<i>Progress 2010:</i> Completed.
5. Conduct store authorization visits across the State.	Local WIC staff	April – June 2009	Selection criteria documented on store visit

ACTION STEPS: (what & why)	WHO:	WHEN:	SPECIAL NOTES:
			review sheets. <i>Progress 2010: Completed.</i>
6. Review and assess documentation of store visits to determine if authorization requirements have been met.	State WIC staff	June – July 2009	<i>Progress 2010: Completed.</i>
5. Develop a new contract training program for WIC retailers to be utilized by local agency WIC vendor managers.	Contractor in consultation with state and local staff	January – July 2009	<i>Progress 2010: Completed. New contract training materials developed and are currently being used for training stores for this contract period of FY 2010 – 2012. Materials were very well received and utilized by WIC staff and retail staff.</i>
6. Research and develop new training materials for the store staff focusing upon the intricate details of processing WIC checks, the cash value vouchers at the check out, and the WIC foods.	Vendor Management Workgroup (local staff, state staff, & retail staff)	January – July 2009	<i>Progress 2010: Completed. New training materials for retail staff have been developed and are excellent educational tools focusing on selecting the correct WIC foods to completing the WIC transaction correctly. The cashier toolkit provides a variety of learning opportunities for retail staff. Materials are an excellent resource for both retail and WIC staff.</i>
7. Provide support to local agency WIC vendor managers as they conduct vendor contract training sessions to all Nebraska WIC authorized retailers so that store staff is informed and the new food package implementation is successful for both the WIC shopper and the cashier.	State and local vendor management staff	August and September 2009	Attendance at contract training documented. <i>Progress 2010: Completed.</i>

ACTION STEPS: (what & why)	WHO:	WHEN:	SPECIAL NOTES:
<p>8. Evaluate the effectiveness of the contract training sessions through a written evaluation completed by those attending.</p>	<p>State and local vendor management staff</p>	<p>August and September 2009</p>	<p><u>Progress 2010:</u> <i>Completed. Attendees at the contract training sessions completed an evaluation at the end of the training. Survey results indicated that the training sessions were effective;</i> <i>- 91.8% reported the objectives of the training were clearly evident;</i> <i>- 84.1% reported that the organization and presentation of materials were excellent;</i> <i>- 82.3% reported that their expectations for the training were met very well;</i> <i>- 80.3% reported that they considered the training excellent;</i> <i>- 86.2% reported that the information covered should be very helpful; and</i> <i>- 84.3% reported that the materials developed for WIC retailers are excellent.</i></p>
<p>9. Monitor the implementation of the new food packages in the stores through:</p> <ul style="list-style-type: none"> a. quarterly surveys completed by store staff to provide feedback to WIC staff, b. problem check banking reports, and c. documented complaints. 	<p>State and local vendor management staff</p>	<p>January 2010 April 2010 July 2010</p>	<p>Quarterly surveys Monthly banking reports Documentation of complaints as reported <u>Progress 2010:</u> <i>The percentage of problem WIC checks has decreased as per the banking reports.</i></p>

ACTION STEPS: (what & why)	WHO:	WHEN:	SPECIAL NOTES:
			<i>The check transaction for the cash value voucher has gone well overall. There have been isolated cases of problems and participant complaints reported to WIC staff. Most of the situations are resolved through educational follow-up. Ongoing follow-up will continue with educational and monitoring efforts with store staff.</i>

STRATEGY: Strengthen follow-up with retail staff through educational and monitoring efforts.

ACTION STEPS: (what & why)	WHO:	WHEN:	SPECIAL NOTES:
<i>1. Utilize to a greater extent, the new training materials for the store staff developed in FY 2009 focusing upon the intricate details of processing WIC checks, the cash value vouchers at the check out, and the WIC foods to help make the WIC transaction a successful experience for the WIC shopper and the cashier.</i>	<i>State and local vendor management staff</i>	<i>Ongoing</i>	<i>Focus upon a greater utilization of the valuable training tools developed and available to the local agency WIC vendor managers and retail staff.</i>
<i>2. Revise the monitoring tools for routine monitoring to meet the need for effective and efficient follow-up for WIC and retail staff.</i>	<i>State and local vendor management staff workgroup</i>	<i>July through September 2010</i>	
<i>3. Pilot the new monitoring tools and revise if needed.</i>	<i>State and local vendor management staff</i>	<i>October & November 2010</i>	

ACTION STEPS: (what & why)	WHO:	WHEN:	SPECIAL NOTES:
	<i>workgroup</i>		
<i>4. Incorporate the new monitoring tools into the tablet PC's.</i>	<i>State and local vendor management staff</i>	<i>December 2010</i>	
<i>5. Utilize the new monitoring tool for routine monitoring and follow-up monitoring.</i>	<i>State and local vendor management staff</i>	<i>January 2011 and Ongoing</i>	
<i>6. Monitor the effectiveness of educational and monitoring and follow-up efforts with retail staff.</i>	<i>State and local vendor management staff</i>	<i>January 2011 April 2011 July 2011</i>	<i>Quarterly surveys Monthly banking reports Documentation of complaints as reported</i>

ACTION PLAN – NEBRASKA WIC PROGRAM

CLIENT SERVICES GOAL: By December 31, ~~2009~~ 2010, the Nebraska WIC Program will assess clinic systems and the effect on client flow.

NEEDS ASSESSMENT:

- Local Agencies have a desire to improve clinic efficiency while maintaining quality service.
- As part of the planning process, it was determined that Nebraska's WIC program does not have standards to measure or evaluate agencies progress or results in the areas of customer service, certification, staffing and wait time.
- LA's may have multiple methods for completing various skills or clinic processes. Finding the best method or best practices would help to standardize the process, moving the program toward more effective and efficient services. Through the implementation of Training Clinic, we have begun to standardize many of the processes, although we have not specifically labeled them as best practices. The training clinic materials and processes can be built upon to identify or develop best practices.
- Our review of other states best practices brought to light that Nebraska does not have any data or standards in the areas of staffing, certification, wait time, scheduling or clinic flow to measure against existing "best practices".
- Our review showed that there are very few or no identified best practices in the WIC clinic service area.

STRATEGY: Current operating practices at each local agency will be assessed using Patient Flow Analysis.

ACTION STEPS: (what & why)	WHO:	WHEN:	SPECIAL NOTES:
1. Orientation to PFA	Workgroup	January 2010	
2. Identify one Local Agency PFA Coordinator per agency. DCHD will identify five PFA coordinators.	Workgroup L.A. Directors	January 2010	
3. Evaluate and define PFA coding and parameters for use in Nebraska	Workgroup	January 2010	<ul style="list-style-type: none"> • Use existing codes for NE as starting point
4. Identify PFA trainers	Marge Jackie	November 2010	<ul style="list-style-type: none"> • Identify up to three trainers
5. Provide PFA training to State staff, PFA Coordinators and other selected persons.	Marge Jackie Contractor	February – October 2010	<ul style="list-style-type: none"> • Contractor to provide training <p><u>Progress:</u> Contractor identified.</p>
6. Implement clinic flow analysis to help establish baselines and standards for provision of WIC services for clinic flow, unit cost and wait time.	SA and LA's	March – November 2010	<ul style="list-style-type: none"> • Use CDC's PFA

ACTION STEPS: (what & why)	WHO:	WHEN:	SPECIAL NOTES:
7. Develop method to track and evaluate PFA results	Marge	June 2010	<ul style="list-style-type: none"> • Choo help with spreadsheet development
8. Interpret results of PFA and make recommendations for provision of quality of WIC services in the areas of client satisfaction, clinic flow, scheduling, unit cost, scheduling and wait time.	SA and LA's	March 2011	<ul style="list-style-type: none"> • Consider the VENA assessment as a model.
9. Workgroup meetings to plan, implement and evaluate PFA training and data collection.		Ongoing	
10. Review data collected, evaluate progress and establish plan for continuation of goal.	Workgroup	June 2010	
13. Visit Texas WIC Program for technical assistance in the areas of PFA and clinic services; including clinic flow, unit cost, scheduling and wait times.	Marge Jackie	Winter 2010	Progress: <i>Technical assistance funds applied for and visit will occur in July or August 2010.</i>
14. Monitor progress of other identified states in establishing best practices in the areas of client satisfaction, clinic flow, unit cost and wait time.	Marge Jackie Workgroup	Ongoing 2010	<ul style="list-style-type: none"> • Such as Hawaii, New Hampshire, West Virginia, California, Louisiana, New Jersey, New York, Montana • Examples of models: Pathways to Excellence for Community Action Agencies and WIC Nutrition Services Standards
15. Evaluate current resources used by Nebraska WIC and USDA to determine best practices we may already have in place and those we wish to implement.	State Staff Workgroup	December 2009	<ul style="list-style-type: none"> • Identify what we are already doing or teaching or is available that is considered best practices but aren't labeled as such. • Possible resources: management eval. materials, training clinic materials, Pathways to Excellence; WIC Nutrition Services Standards

Progress: Goal was placed on hold during FY2009 due to the Food Package Implementation requirements for staff time & resources. Goal discontinued for FY2011. Many of these action steps will be incorporated into the Patient Centered Education Goal during the coming 4-5 years.

FFY2011 Goals, Strategies and Action Steps—NEW

ACTION PLAN – NEBRASKA WIC PROGRAM- NEW FY2011 GOAL

CLIENT SERVICES GOAL: By October 1, 2011, the Nebraska WIC Program will assess clinic systems and practices using the Participant Centered Services (PCS) Model.

NEEDS ASSESSMENT:

- *Local Agencies have a desire to improve clinic efficiency while maintaining quality service.*
- *As part of the planning process, it was determined that Nebraska's WIC program does not have standards to measure or evaluate agencies progress or results in the areas of customer service, certification, staffing and wait time.*
- *LA's may have multiple methods for completing various skills or clinic processes. Finding the best method or best practices would help to standardize the process, moving the program toward more effective and efficient services. Through the implementation of Training Clinic, we have begun to standardize many of the processes, although we have not specifically labeled them as best practices. The training clinic materials and processes can be built upon to identify or develop best practices.*
- *Our review showed that there are very few or no identified best practices in the WIC clinic service area.*
- *The Participant Centered Services (PCS) model developed for the Western Region by Altarum Institute is a business model that crosses over to all levels of WIC services and can be used to improve delivery of service through a systems based approach.*

STRATEGY: Current operating practices at each local agency will be assessed using Participant Centered Education Model.

ACTION STEPS: (what & why)	WHO:	WHEN:	SPECIAL NOTES:
1. Initial meeting to train State WIC staff on basics of PCS model, discuss the approach and develop timeline.	Contractor Marge	June 2010	
2. Statewide training session for WIC Local agency staff to present PCS business model to WIC Local Agencies.	Contractor Marge Jackie Julieann	September 2010	
3. State Level Assessment to determine State WIC Staff capability to support PCS and identify strengths and challenges for implementation.	Contractor Marge Jackie Julieann	October 2010	
4. Local Agency Assessments to of at least four local agencies.	Contractor Marge	March 2011	
5. Presentation of State assessment report including findings, observations and recommendations for next steps.	Contractor Marge	May 2011	

ACTION STEPS: (what & why)	WHO:	WHEN:	SPECIAL NOTES:
6. Using the findings in the assessment report develop a strategic plan for implementation of Participant Centered Services in all Nebraska WIC clinics.	Contractor Marge State WIC Staff	June 2011	